Iowa Division of Labor Elevator Safety

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| FOR OFFICE USE ONLY | | | | | |
|---------------------|------------|--|--|--|--|
| Approved | Denied | | | | |
| Issue date: | | | | | |
| ID #: | Exp. Date: | | | | |

Temporary Construction Permit Application

| Building name | | | Rated speed | | Rated capacity | | |
|--|--|--------------------|-------------|-------|----------------|------------|--|
| Address/location | City | | | State | | Zip | |
| State inspector's printed name | State inspector's signature | | | | | | |
| Fold on the dotted line and | d display top portion in eleva | itor | | | | | |
| Application and permit fees must be paid before | a permit will be issu | ıed. | | | | | |
| Initial inspection fee - \$200.00 Renewal inspecti | on fee - \$100.00 | | | | | | |
| Responsible party's name | Title | | | | | | |
| Company name | Phone number | Email ad | ldress | | | | |
| Address | City | | | State | e | Zip | |
| The safety test was performed under the rated load. Landing entrances are guarded, locked and unlocked from Landing call buttons are not operated unless the hoistway. A notice is posted at each entrance stating the equipment of the complies with the requirements found in I Section 5.10. The elevator will be used for construction material. | door-locking devices are thas not been finally acce | pted. Section 7 | 2.23(89A) | | vith A | ASME A17.1 | |
| Signature | Date | | | | | | |